

EXHIBIT 10

DO NOT USE THIS FORM TO REPORT: CRIME CLASSIFICATION, CHARGES, CASE CLEARANCES, INITIAL ARREST ON THE COMPLAINT, COVERED PROPERTY, ADDITIONAL STOLEN PROPERTY SERIAL NUMBERS OBTAINED FOR PROPERTY PREVIOUSLY REPORTED, CRIME INCIDENT DATA, USE COMPLAINT FOLLOW-UP (PL 081) TO REPORT THE PRECEDING.

**COMPLAINT - FOLLOW UP
INFORMATIONAL**
PD 313-081A (Rev. 4-89)-31

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Crime
HOMICIDE #2Pct.
043

OCCB No.

Complaint No
2412Date of This Report
2/27/01Date of Orig. Report
2/12Date Assigned
2/12Case No.
624Unit Reporting
43 PDS

Follow-Up No.

Complainant's Name - Last, First, M.I.

PSNY FOR ACOSTA, ALBERT

Victim's Name - If Different

Last Name, First, M.I.

Address, Include City, State, Zip

Apt. No.

Home Telephone

Business Telephone

Position / Relationship

Sex

Race

Date of Birth

Age

Total No. of
Perpetrators

Wanted

Arrested

Weapon

Describe Weapon (If firearm, give color, make, calibre, type, model, etc.)

Wanted

Arrested

Last Name, First, M.I.

Address, Include City, State, Zip

Apt. No.

Res. Pct.

Sex

Race

Date of Birth

Age

Height

Ft

In

Weight

Eye Color

Hair Color

Hair Length

Facial Hair

NYSID No.

☐ Eyeglasses ☐ Sunglasses

Nickname, First Name, Alias

Clothing Description,

Scars, Marks, M.O., Etc.

(Continue in "Details")

Wanted

Arrested

Last Name, First, M.I.

Address, Include City, State, Zip

Apt. No.

Res. Pct.

Sex

Race

Date of Birth

Age

Height

Ft

In

Weight

Eye Color

Hair Color

Hair Length

Facial Hair

NYSID No.

☐ Eyeglasses ☐ Sunglasses

Nickname, First Name, Alias

Clothing Description,

Scars, Marks, M.O., Etc.

(Continue in "Details")

AREA WITHIN BOX FOR DETECTIVE / LATENT FINGERPRINT OFFICER ONLY. THIS BOX WILL BE UTILIZED BY INVESTIGATOR WHENEVER POSSIBLE AND MUST BE FULLY COMPLETED WHEN USING THIS FORM TO CLOSE A CASE "NO RESULTS."

Comp. Interviewed

☐ Yes ☐ No

In Person

☐ Yes ☐ No

By Phone

☐ Yes ☐ No

Date

Time

Results: Same as Comp. Report - Different (Explain in Details)

☐ Yes ☐ No

Witness Interviewed

☐ Yes ☐ No

In Person

☐ Yes ☐ No

By Phone

☐ Yes ☐ No

Date

Time

Results: Same as Comp. Report - Different (Explain in Details)

☐ Yes ☐ No

Canvass Conducted

☐ Yes ☐ No

If Yes - Make Entry in Body Re: Time, Date,

Names, Addresses, Results

Crime Scene Visited

☐ Yes ☐ No

If Yes - Make Entry in Details Re: Time, Date,

Evidence Obtained

Complainant Viewed Photos

☐ Yes ☐ Refused ☐ Future

Results:

Witness Viewed Photos

☐ Yes ☐ Refused ☐ Future

Results:

Crime Scene Dusted

☐ Yes ☐ No

By (Enter Results in Details)

Crime Scene Photos

☐ Yes ☐ No

By (Enter Results in Details)

If Closing Case "No Results," Check Appropriate Box and State Justification in Details:

☐ C-1 Improper Referral☐ C-2 Inaccurate Facts☐ C-3 No Evidence / Can't ID☐ C-4 Uncooperative Complainant☐ C-5 "Leads" Exhausted**DETAILS:**Investigate: **HOMICIDE**Subject: **RE-INTERVIEWED SAL MIRO**

- On February 27, 2001, at approx. 1855 hrs., Det Deleo (BXHTF) and the u/s visited Sal Miro at 1610 Metropolitan Ave apt MB. He stated Manganiello told him approx. 1 year ago that he has a .22 gun and carries it sometimes on him. He also stated the owner of Pizza Place on Metropolitan Ave told him Manganiello asked him for a .22 gun.

- Case active.



CASE <input type="checkbox"/> ACTIVE <input type="checkbox"/> CLOSED		DATE REVIEWED / CLOSED		IF ACTIVE, DATE OF NEXT REVIEW	
REPORTING OFFICER:	RANK Det	SIGNATURE 	NAME PRINTED Luis R. Agostini	TAX REG. NO. 889648	COMMAND 043
REVIEWING / CLOSING		CASE	ENTER DESIGNATION	SIGNATURE	